## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
	18/11	177G1	1.4.=	
FEE DETERMINATION	_////	1 12 11	1445	
O.I.P.E. CLASSIFIER		1 21	10/19/00	
FORMALITY REVIEW	Pl	42.3	11/08	
RESPONSE FORMALITY REVIEW	MIN	780	4-11.01	

## INDEX OF CLAIMS

,	Rejected	N	Non-elected
	Allowed	1	Interference
_	(Through numeral) Canceled	Α	
÷	Restricted	0	Objected

Com Care		Co. I
[040]	Claim Date	Claim Date
Finkii Orginal	Final Original	Final Original
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	51	101
2	52	102
3	53	
6	54	104
5	55	106
6.	56	106
	57	107
8	50	108
	59	109
10) 77	60	110
	61	111
12	62	112
13 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	63	113
14	64	114
15	65	115
16	66	116
(の)ヘッカー	67	117
18	68	118
19	69	[113]
20	70	120
21	71	121
	72	122
23 ( )	73	123
2	74	124
25	75	125
26	76	126
27 1 1	77	10
28	78	128
29	79	129
30	80	130
31 - 1 - 1 - 1 - 1	81	131
32	82	132
33	83	133
34	84	134
35	85	135
36	86	136
37	87	1-1-3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
38	88	136
39	89	139
40	90	140
41	91	144
42	92	142
42 + + + + + + + + + + + + + + + + + + +	93	143 1 1 1 1 1 1 1
	93	<del>                                    </del>
44	95	145
45	96	146
46	97	147
	98	148
49   .	99	1
	100	145
50		

If more than 150 claims or 10 actions staple additional sheet here

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